SDMS DOCID# 1118159 State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91) See Instructions on Back of Page 6 Department of Health Services Toxic Substances Control Division Sacramento, California and Front of Page ? Please print or type. (Form designed for use on elite (12-pitch typewriter). 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest 2. Page 1 Information in the shaded areas WASTE MANIFEST QAD 080 1080 877 is not required by Federal law. 3. Generator's Name and Mailing Address
LOMA LINDA UNIVERSITY A. State Manifest D 8861 10970 PARKLAND.., LOMA LINDA, CA B. State Generator's ID 4. Generator's Phone (714 824-4913 5. Transporter 1 Company Name
OMEGA RECOVERY SERVICES 1-800-852-7550 C. State Transporter's ID CAD D. Transporter's Phone -0991 7. Transporter 2 Company Name US EPA ID Number E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES US EPA ID Number G. State Facility's ID CIAIDO1412121415101011. 12504 E. WHITTIER BLVD 213 698-0991 WHITTIER, CA 90602 CAD 042 245 001 12. Containers 13. Total 14. Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Quantity Waste No. No. Туре State "RO" WASTE FLAMMABLE LIQUID, N.O.S 214 (MIXED SOLVENTS) UN 1993 EPA/Othe F003,F005 COMBUSTIBLE EPA/Other N.A. 1270 OIOH State EPA/Other CENTER d. State EPA/Other RESPONSE J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above • C. d. NATIONAL 15. Special Handling Instructions and Additional Information 里 PROFILE NUMBER A 11950 CALL 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and SPILL national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 8 **EMERGENCY** Printed/Typed Name Month Day Year 21912101910 17. Transporter 1 Acknowledgement of Receipt of Materials Z Printed/Typed Name Signature Month Day Year OF JAVIER ERNANDEZ 101912101910 ant of Receipt of Materials 18. Transporter 2 Acknowledg CASE Month Day Year Signatur 19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Month Day 091201910

DHS 8022 A (1/88) EPA 8700-(Rev. 9-88) Previous editions are obsolete.

AC

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS To: P.O. Box 3000, Sacramento, CA 95812